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|--|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/604,948   | <b>FILING OR 371(c) DATE</b><br>08/28/2003<br><b>RULE</b>   | <b>CLASS</b><br>604           | <b>GROUP ART UNIT</b><br>3768   | <b>ATTORNEY DOCKET NO.</b><br>71202-0030 |
| <b>APPLICANTS</b><br>James J. Langan, Rockford, IL;<br>Ryan L. Goosen, Coopersville, MI;<br>Steven E. Field, Grand Rapids, MI;   |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/319,513 08/30/2002  |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 11/25/2003  |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>IL | <b>SHEETS DRAWING</b><br>15   | <b>TOTAL CLAIMS</b><br>59                |
| <b>INDEPENDENT CLAIMS</b><br>2   |   |                               |   |  |
| <b>ADDRESS</b><br>61263  |   |                               |   |  |
| <b>TITLE</b><br>LOCALIZING NEEDLE WITH FLUID DELIVERY  |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>791  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |